

County: Green  
NEW GLARUS HOME, INC.  
600 2ND AVENUE

Facility ID: 6060

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NEW GLARUS 53574 Phone: (608) 527-2126  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 97  
Total Licensed Bed Capacity (12/31/01): 97  
Number of Residents on 12/31/01: 87

Ownership:  
Highest Level License: Nonprofit Church/Corporation  
Operate in Conjunction with CBRF? Skilled  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 89

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		25.3
Supp. Home Care-Personal Care	No					1 - 4 Years		24.1
Supp. Home Care-Household Services	No	Developmental Disabilities	1.1	Under 65	0.0	More Than 4 Years		50.6
Day Services	No	Mental Illness (Org./Psy)	39.1	65 - 74	9.2			-----
Respite Care	No	Mental Illness (Other)	2.3	75 - 84	19.5			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	52.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.1	95 & Over	18.4	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	1.1		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.1		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	13.8	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	9.2		-----	RNs		11.0
Referral Service	No	Diabetes	2.3	Sex	%	LPNs		5.1
Other Services	No	Respiratory	1.1		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	27.6	Male	24.1	Aides, & Orderlies		
Mentally Ill	No		-----	Female	75.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	1	100.0	189	39	97.5	99	0	0.0	0	44	95.7	120	0	0.0	0	0	0.0	0	84	96.6
Intermediate	---	---	---	1	2.5	82	0	0.0	0	2	4.3	115	0	0.0	0	0	0.0	0	3	3.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	1	100.0		40	100.0		0	0.0		46	100.0		0	0.0		0	0.0		87	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	1.7	Daily Living (ADL)	Independent			
Private Home/With Home Health	15.3	Bathing	0.0	62.1	37.9	87
Other Nursing Homes	20.3	Dressing	0.0	73.6	26.4	87
Acute Care Hospitals	49.2	Transferring	0.0	72.4	27.6	87
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	0.0	67.8	32.2	87
Rehabilitation Hospitals	1.7	Eating	0.0	87.4	12.6	87
Other Locations	11.9	*****				
Total Number of Admissions	59	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	2.3	Receiving Respiratory Care		4.6
Private Home/No Home Health	8.2	Occ/Freq. Incontinent of Bladder	48.3	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	11.5	Occ/Freq. Incontinent of Bowel	24.1	Receiving Suctioning		0.0
Other Nursing Homes	1.6			Receiving Ostomy Care		0.0
Acute Care Hospitals	14.8	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	18.4	Receiving Mechanically Altered Diets		39.1
Rehabilitation Hospitals	0.0					
Other Locations	6.6	Skin Care		Other Resident Characteristics		
Deaths	57.4	With Pressure Sores	2.3	Have Advance Directives		92.0
Total Number of Discharges		With Rashes	3.4	Medications		
(Including Deaths)	61			Receiving Psychoactive Drugs		56.3

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Nonprofit Peer Group Ratio %	Bed Size: 50-99 Peer Group Ratio %	Licensure: Skilled Peer Group Ratio %	All Facilities %
Occupancy Rate: Average Daily Census/Licensed Beds	91.8	88.9	1.03	85.1	1.08
Current Residents from In-County	80.5	78.4	1.03	72.2	1.12
Admissions from In-County, Still Residing	23.7	25.3	0.94	20.8	1.14
Admissions/Average Daily Census	66.3	108.1	0.61	111.7	0.59
Discharges/Average Daily Census	68.5	107.3	0.64	112.2	0.61
Discharges To Private Residence/Average Daily Census	13.5	37.6	0.36	42.8	0.31
Residents Receiving Skilled Care	96.6	90.9	1.06	91.3	1.06
Residents Aged 65 and Older	100	96.2	1.04	93.6	1.07
Title 19 (Medicaid) Funded Residents	46.0	67.9	0.68	67.0	0.69
Private Pay Funded Residents	52.9	26.2	2.02	23.5	2.25
Developmentally Disabled Residents	1.1	0.5	2.28	0.9	1.27
Mentally Ill Residents	41.4	39.0	1.06	41.0	1.01
General Medical Service Residents	27.6	16.5	1.67	16.1	1.72
Impaired ADL (Mean)	63.9	49.9	1.28	48.7	1.31
Psychological Problems	56.3	48.3	1.16	50.2	1.12
Nursing Care Required (Mean)	6.2	7.0	0.88	7.3	0.85